FORM D









DATE RECEIVED

Prefix



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering / (check if this is an amendment	nt and name has changed, and indicate change.)				
FORCE TEN FINANCIAL SERVICES, INC.					
Filing Under (Check box(es) that apply): Rule	504 Rule 505 Rule 506 Section 4(6)	ULOE			
Type of Filing:					
	A. BASIC IDENTIFICATION DATA				
1. Enter the information requested about the issuer					
Name of Issuer (check if this is an amendment a	nd name has changed, and indicate change.)				
FORCE TEN FINANCIAL SERVICES, INC.					
Address of Executive Offices	Telephone Number (Including Area Code)				
1440 CORAL RIDGE DRIVE, #367, CORAL SPRINGS, FL 33071 (954) 579-8599					
Address of Principal Business Operations (if different from Executive Offices)	Telephone Number (Including Area Code)				
Brief Description of Business					
PROVIDER OF REAL ESTATE FINANCIAL S	ERVICES	DD o			
		PROCESSED			
Type of Business Organization		- OCOLD			
		please specify):			
business trust limited	partnership, to be formed	MAR 1 5 2007			
Actual or Estimated Date of Incorporation or Organization: (Enter CN)		mated 2			
OFFICE ALL INCOMPLICATIONS					

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA	A. BASIC IDENTIFICATION DATA							
Enter the information requested for the following:								
• Each promoter of the issuer, if the issuer has been organized within the past five years;	 Each promoter of the issuer, if the issuer has been organized within the past five years; 							
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition 	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.							
 Each executive officer and director of corporate issuers and of corporate general and man 	aging partners of	partnership issuers; and						
 Each general and managing partner of partnership issuers. 								
Check Box(es) that Apply:	✓ Director	General and/or Managing Partner						
Full Name (Last name first, if individual) SIEGEL, SCOTT								
Business or Residence Address (Number and Street, City, State, Zip Code) 1440 CORAL RIDGE DRIVE, #367, CORAL SPRINGS, FL 33071								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual) GRANITZ, JR., CHRISTOPHER B.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
1440 CORAL RIDGE DRIVE, #367, CORAL SPRINGS, FL 33071								
Check Box(es) that Apply: Promoter Beneficial Owner Z Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual) JOSEPHY, KENNETH S.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
1440 CORAL RIDGE DRIVE, #367, CORAL SPRINGS, FL 33071								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								
(Use blank sheet, or copy and use additional copies of this sl	heet, as necessary)						

B. INFORMATION ABOUT OFFERING													
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.								Yes	No 😿			
2.	What is	the minim	um investm			•						\$_25,0	00.00
												Yes	No
3.			permit joint									K	
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								ne offering. with a state				
	II Name (Last name	first, if indi	vidual)									
		Residence	Address (N	umber and	l Street, Ci	ity, State, Z	ip Code)						
				1								_	
Na	me of As:	sociated Br	oker or Dea	ner									
Sta			Listed Has										
	(Check	"All States	s" or check	individual	States)			••••••		***************	••••••	☐ All	States
	AL IL MT RI	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Fu	ll Name (Last name	first, if indi	ividual)									-
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State, 2	Zip Code)						·
Na	me of As	sociated B	roker or De	aler	·								
Sta			Listed Has						· -				
	(Check	"All State:	s" or check	individual	l States)	•••				*****	•••••		1 States
	IL MT RI	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Fu	II Name (Last name	first, if ind	ividual)			-						
Bu	isiness oi	r Residence	Address (1	Number an	id Street, C	City, State,	Zip Code)						
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)													
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \[\] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity	\$	\$
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		
	Other (Specify UNITS COMMON STOCK AND WARRANTS		
	Total	§ 3,600,000.00	\$ <u>0</u> .00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	0	\$_0.00
	Non-accredited Investors	0	\$_0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs	Z	\$ 2,000.00
	Legal Fees	Z	\$_10,000.00
	Accounting Fees		\$_5,000.00
	Engineering Fees	_	\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) FILING FEES AND MISCELLANEOUS	_	\$ 33,000.00
	Total		\$ 50,000.00

	b. Enter the difference between the aggregate offe and total expenses furnished in response to Part C – proceeds to the issuer."	 Question 4.a. This difference is the "adjusted 	l gross	\$	
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for a check the box to the left of the estimate. The total opposeds to the issuer set forth in response to Pa	ny purpose is not known, furnish an estima of the payments listed must equal the adjusted	te and		
			Payments to Officers, Directors, & Affiliates	Payments to Others	
	Salaries and fees			\$	
	Purchase of real estate	🗀 \$			
	Purchase, rental or leasing and installation of ma		□\$		
	Construction or leasing of plant buildings and fa		_	_	
	offering that may be used in exchange for the ass	quisition of other businesses (including the value of securities involved in this ering that may be used in exchange for the assets or securities of another ler pursuant to a merger)			
	Repayment of indebtedness		_ 🗆 \$		
	Working capital				
	Other (specify): SALES AND MARKETEING	[\$	_ \$\ _1,300,000.00		
	OFFICE, GENERAL AND ADMINISTRATIVE	 	<u> 750,000.00</u>		
	Column Totals	\$ 0.00	\$ 3,550,000.0		
	Total Payments Listed (column totals added)	<u>\$</u> 3,550,000.00			
		D. FEDERAL SIGNATURE			
sig	e issuer has duly caused this notice to be signed by the enature constitutes an undertaking by the issuer to fi information furnished by the issuer to any non-ac	urnish to the U.S. Securities and Exchange C	ommission, upon writt		
lss	suer (Print or Type)	Signature	Date		
F	ORCE TEN FINANCIAL SERVICES, INC.	KM Shew	FEBRUARY 16	3, 2007	
Na	nme of Signer (Print or Type)	Title of Signer (Print or Type)	, <u>,</u> , t		
SC	OTT SIEGEL	PRESIDENT AND CEO			

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

 $\mathbb{E}\mathcal{N}\mathcal{D}$

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)